

*(Applicant must file two duplicate originals; please type or print legibly in **black** ink.)*

**TOWN OF HAMPTON, NH
VOLUNTARY LOT MERGER FORM**

As provided for in RSA 674:39-a, the undersigned applicant requests that the Town of Hampton, New Hampshire, hereby merge the following parcels of land for the purposes of being assessed and treated for regulatory purposes as a single tract or parcel of land:

Name of record owner(s) (must be identical for all lots consolidated): _____

Mailing address of owner(s):

Street

Town

State & Zip Code

The following existing parcels are to be consolidated into a single parcel:

<u>Map #</u>	<u>Lot #</u>	<u>Street Address</u>	<u>DEED REFERENCE</u>	
			<u>Book</u>	<u>Page</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

(Attach additional sheet if necessary)

It is a condition of this application that each of the above parcels shall (i) not be subject to separate liens or mortgages, or (ii) any such liens apply equally to all parcels merged. In addition, all real estate taxes on all parcels shall be current. By signing below, legal counsel for the owner(s) certifies as to the facts of either (i) or (ii) above.

Dated: _____

Signature of Legal Counsel to Applicant

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By signing below, the applicant agrees that (i) this request is subject to approval of the Building Inspector to assure such merger does not create a violation of the current zoning ordinance or subdivision regulations, (ii) that upon approval, a copy of this agreement shall be recorded in the Rockingham County Registry of Deeds, and (iii) subsequent to the approval of this agreement, the owner(s) shall not separately convey or encumber any of the previously existing parcels. Any attempt to separately convey any parcel or part of a parcel submitted hereunder shall require subdivision approval from the Hampton Planning Board.

Dated _____, 20_____.

Owner's signature

Owner's signature

Print Name(s): _____

(For municipal use only)

By signature below, the application has been reviewed by the Hampton Building Inspector and the lot merger shall not result in a violation of the current zoning ordinance or subdivision regulations.

Date: _____

Building Inspector

By signature below, this request has been approved by the Hampton Tax Assessor, who assigned the following tax map and lot number to the resulting parcel:

Tax Map #: _____ Lot #: _____

Date: _____

Tax Assessor

One original to be retained in Tax Assessor's files. One original shall be forwarded to the Rockingham County Registry of Deeds for recording upon approval. Recorded copy to be returned to Owner(s).